

Chapter 7 –Close-Out Procedures

A. Final Claim

The final claim on an award is due to IHFA by 5:00PM the date the award expires. Claims received after this time will not be processed by IHFA.

IHFA will withhold the final payment on your award until all close-out documentation, including match/leverage information and all other supporting documentation has been submitted and approved by IHFA staff.

The following is what must be submitted:

- a. Exhibit A – Status of Federal Cash & Match/Leverage Statement;
- b. Exhibit B – Property Inventory Form;
- c. Exhibit C – Financial Settlement/Expenditure Summary;
- d. Exhibit D – Applicants & Beneficiary Summary;
- e. Exhibit E – Narrative;
- f. Exhibit F – Certification of Recipient; and
- g. Exhibit G – Individual Match/Leverage Summary Form.

B. Status of Federal Cash & Match/Leverage Statement (Exhibit A)

The purpose of this form is to list all of the project financing and applicable match information.

Computation of Award Balance

- 1. Enter the total award amount as shown in your award agreement.
- 2. Enter the total amount of HOME or CDBG funds received from IHFA.
- 3. List any HOME or CDBG funds that were returned to the IHFA.
- 4. Total funds used for award (line 2 minus line 3).
- 5. Total program income that was expended on project.
- 6. Total match or leverage generated and applied to this project.
- 7. Total amount of other income utilized for this project.
- 8. Total funds expended on project (add lines 4-7).
- 9. Amount to be deobligated from your award (line 1 minus line 4).

Computation of Loan Balance (Not Applicable to INTR Planning Studies)

- 10. Enter the total award amount as shown in your loan agreement..
- 11. Enter the total amount of HOME or CDBG funds received from IHFA.
- 12. Total amount of other income utilized for this project.
- 13. Total funds expended on project (add lines 11+12).
- 14. Amount to be deobligated from your award (line 10 minus line 11).

Computation of HOME Match/CDBG Leverage (Not Applicable to INTR Planning Studies)

15. Enter the total funds expended (line 4)
16. HOME Recipients Only: List the amount applied to administration and environmental review.
17. Enter the dollar amount requiring match (line 17 minus line 18).
18. Enter your match liability (INTR Planning Studies – 0%).

Banked Match/Leverage (Not Applicable to INTR Planning Studies)

19. Enter the amount of match or leverage that has been banked from prior awards.
20. Enter the HOME-eligible match or CDBG-eligible leverage applied to project (line 6).
21. Enter the applicable match liability (line 18)
22. Enter the amount of match/leverage that will be carried forward for future awards (line 19+20-21).

Percentage of HOME Match/CDBG Leverage (Not Applicable to INTR Planning Studies)

23. Enter the HOME-eligible match or CDBG-eligible leverage applied to project (line 6).
24. Enter the amount of banked match you are utilizing (line 18-6)
25. Enter the total match (line 23+24)
26. Enter the percentage of match/leverage applied to project (line 25/4)

C. Property Inventory Form

N/A for recipients of CHDO Works or HOME Subrecipient awards.

The purpose of this form is for recipients to account for any real property or equipment purchased with award funds. Please list any real property or equipment purchased throughout your award period.

D. Financial Settlement/Expenditure Summary

Complete a line for each budget line item, the most recent approved budget amount, amount drawn and the amount remaining to be drawn. The total amount remaining to be drawn must match line 9 of Exhibit A.

E. Applicants & Beneficiary Summary

At the top of the form, indicate with an “X” the appropriate award activity. If a project involves more than one activity, submit a separate sheet for each activity as well as total sheet. The total sheet must reflect the number of persons for the entire award, non-double counted [if the same person is involved in more than one housing activity (e.g. homeownerships counseling and downpayment assistance), only count the person once on the total sheet].

List nothing in the applicants section. In the beneficiary section, please list zero households, however, you must list the number of low moderate income persons in the project locality and list the demographic distribution based on ethnicity.

Total Applicants: Enter the total number of households that applied for assistance and the total persons within the households. Enter the total number of Hispanic households that applied and the number of Hispanic persons.

Total Beneficiaries: Enter the total number of households that benefited from the HOME or CDBG award and the total persons within the households. Enter the total number of Hispanic households that applied and the number of Hispanic persons.

Cumulative Applicants: Report information on all persons that have completed an application for the program from the beginning of the award period.

Cumulative Beneficiaries: Report information on all persons benefiting from the program from the beginning of the award period.

Cumulative Beneficiaries: Report information on all persons benefiting from the program from the beginning of the award period.

Line 1-10: List the number of persons that applied and received assistance based on their ethnicity.

Line 11: List the total number of persons that applied and/or received assistance.

Line 12: List the number of low and moderate-income persons. Low and moderate-income persons have incomes less than 80% of area median income (adjusted for household size) as established by HUD.

Line 13: List the number of disabled persons (persons with a physical or mental impairment).

Line 14: List the number of elderly persons (persons aged 62 and over).

Line 15: List the number and percentage of persons living in Female Headed Households. A female head of household cannot be a single female it must be a female with a dependent.

F. Narrative Section

Answer all questions as given.

G. Certification of Recipient

The Chief Executive Officer must sign that all activities undertaken by the Recipient with funds provided under the award agreement identified above have, to the best of my knowledge, been completed in accordance with the award agreement; that the United States of America and the Indiana Housing Finance Authority are under no obligation to make any further payment in any form to the Recipient under the award agreement; and that every statement and amount set forth in this instrument is, to the best of my knowledge, true and correct as of this date. The recipient hereby agrees that any costs under this award disallowed by a subsequent audit by the Indiana State Board of Accounts or independent accounting firm will be promptly remitted to the Indiana Housing Finance Authority by the recipient.

I. Exhibits

- A. Status of Federal Cash & Match/Leverage Statement
- B. Property Inventory Form
- C. Financial Settlement/Expenditure Summary
- D. Applicants & Beneficiaries Summary
- E. Narrative
- F. Certification of Recipient